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Punder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information uniter PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Si it displays a valid OMB control number. Application or Docket Number //) Q/5292		
CLAIMS AS FILED - PART I (Column 1) (Column 2)				SMALL ENTITY	OR		R THAN ENTITY	
FOR NUMBER FILED) NUMB	ER EXTRA	RATE FEE		RATE	FEE	
BASIC FEE (37 CFR 1.18(a))			285	OR		5		
TOTAL CLAIMS (37 CFR 1.16(cj)	40 minus	20 = . 2	0	X 8	OR	x \$•		
INDEPENDENT CLAIMS (37 CFR 1.18(b))	✓ minus 3 ×		xs = /90	OR	x \$a	,		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CPR 1.18(d))				+======================================	OR	+5=		
* If the difference in column 1 is less than zero, enter "O" in column 2.				TOTAL 608	OR	TOTAL		
CLAIMS AS AMENDED - PART II								
1/2/10%	Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OR	OTHER SMALL		
Y K	CLAIMS REMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total To	35 Minus	40	* 0	x 8.	OR	X 8		
Z Independent (07 OFR 1,16(0))	Minus	4	0	x *	OR	X 8 0		
PRIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))					OR	+3 0		
4123/01				ADD'L FEE	OR	TOTAL ADDL FEE		
10-	Cotumn 1)	(Calumn 2)	(Column 3)			,		
	CLAIMS REMAINING AFTER MENDMENT	HIGHEST NUMBER PREVIOUSLY PAIDFOR	PRESENT EXTRA	RATE ADDITIONAL FEB	Y	RATE	ADDI- TIONAL	
(37 CFR 1.16(d)	35 Minus		-	100	OR	XX	FEE	
Independent (27 CFR 1,16(b))	A Minus	4	•/	×1/20/	OR	(A11.)		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAUM (37 GAR 1.16(d))				+	OR	1. Z.		
nelinla				ACOL FEE	OR	TOTAL ABO'L FEE		
02 11.110°	Obtumn 1) CLAIMS	(Column 2)	(Column 3)	·	7			
O I A	REMAINING AFTER MENDMENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE ADDI- TIONAL REE		RAȚE	ADDI- TIONAL FEE	
Total (For 1.16a) * Total (For 1.16a) * Independent (For 1.16a)	35 Minus	170	.0	X %	OŖ	x s=		
Z Independent (17 CFR 1,180H)	3 Minus	"4	10	X 8 n	OR	X 8 =		
TROOFFEEDERIATION OF BULLIPE DEPENDENT COME (37 CPR 1.18(0))								
			•	TOTAL ADOL FEE	OR	TOTAL ADOL FEE		
" If the "Highest Num	on 1 is less than the er ober Previously Paid Fo ber Previously Paid Fo	OF IN THIS SPACE	is less than 20.	enter "20".	_			

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. There will vary depending upon the including some nation of the pour require to complete this form and/or suggestions for reducing this burden, should be sent to the CHell Information Officer, U.S. Patern and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patants, P.O. Box 1450, Alexandria, VA 22313-1450.

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